



Medical Spanish OSCE Rubric

Name of Student _____

Date Completed: _____

Setting the stage of the encounter	NOT Performed	Incompletely Performed	Performed
1. Greetings and introduction (introduces self with the name and as a medical student)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Disinfects hands prior to shaking hands with patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Verifies identifying data & Determines how the patient wishes to be addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Ensures the patients' privacy and comfort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Sets the agenda (explains what will happen during the encounter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Asks permission to proceed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Patient history	Did not perform	Incompletely Performed	Performed Moderately Well	Performed Exceptionally
1. Elicits chief complaint (uses open ended question such as "What brings you in")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Gives the patient the opportunity to relay the issues in his or her own words (e.g. asks "What more can you tell me about that?")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. History of presenting illness (HPI). <input type="checkbox"/> Site <input type="checkbox"/> Onset <input type="checkbox"/> Character <input type="checkbox"/> Radiates <input type="checkbox"/> Aggravating <input type="checkbox"/> Alleviating <input type="checkbox"/> Severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. HPI : Elicited case specific questions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Inquires about past medical history <input type="checkbox"/> Previous Illness <input type="checkbox"/> Surgery <input type="checkbox"/> Hospitalization <input type="checkbox"/> Trauma / Accidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Inquires about <input type="checkbox"/> medications <input type="checkbox"/> drug allergies <input type="checkbox"/> food allergies <input type="checkbox"/> environmental allergies <input type="checkbox"/> immunizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Elicits habits <input type="checkbox"/> alcohol <input type="checkbox"/> tobacco <input type="checkbox"/> drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Elicits other aspects of the social history <input type="checkbox"/> marital status <input type="checkbox"/> sexual history <input type="checkbox"/> diet <input type="checkbox"/> exercise <input type="checkbox"/> employment <input type="checkbox"/> hobbies <input type="checkbox"/> travel <input type="checkbox"/> pets <input type="checkbox"/> sick contacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Elicits family history <input type="checkbox"/> parents <input type="checkbox"/> siblings / children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Review of Systems <input type="checkbox"/> Fever / Weight changes <input type="checkbox"/> Neuro <input type="checkbox"/> Cardio <input type="checkbox"/> Respiratory <input type="checkbox"/> GI <input type="checkbox"/> Renal <input type="checkbox"/> MSK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Summarizes and checks for accuracy of information provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CLOSING THE ENCOUNTER AND PROFESSIONALISM	Did not perform	Incompletely Performed	Performed
1. Informs about what happens next	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Asked the patient "Does he/she has any questions? Concerns?"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Demonstrated attentiveness via non-verbal body language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Used appropriate language and avoided medical jargon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Demonstrated professional behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Makes a logical differential diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Medical Spanish OSCE Rubric

Name of Student _____

Date Completed: _____

Setting the stage of the encounter	NOT Performed	Incompletely Performed	Performed
1. Greetings and introduction (introduces self with the name and as a medical student)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Disinfects hands prior to shaking hands with patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Verifies identifying data & Determines how the patient wishes to be addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Ensures the patients' privacy and comfort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Sets the agenda (explains what will happen during the encounter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Asks permission to proceed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Patient history	Did not perform	Incompletely Performed	Performed Moderately Well	Performed Exceptionally
1. Elicits chief complaint (uses open ended question such as "What brings you in")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Gives the patient the opportunity to relay the issues in his or her own words (e.g. asks "What more can you tell me about that?")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. History of presenting illness (HPI). <input type="checkbox"/> Site <input type="checkbox"/> Onset <input type="checkbox"/> Character <input type="checkbox"/> Radiates <input type="checkbox"/> Aggravating <input type="checkbox"/> Alleviating <input type="checkbox"/> Severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. HPI : Elicited case specific questions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Review of Systems <input type="checkbox"/> Fever/weight changes <input type="checkbox"/> Neuro <input type="checkbox"/> Cardio <input type="checkbox"/> Respiratory <input type="checkbox"/> GI <input type="checkbox"/> Renal <input type="checkbox"/> MSK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Summarizes and checks for accuracy of information provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Asks patient to lie down <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Asks patient to expose stomach <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Inspection: Names at least 3 things they are looking for: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Tells patient they will listen for bowel sounds <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Tells patient that they will tap on their stomach <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Tells patient they will perform light palpation <input type="checkbox"/> Asks patient if they feel pain <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Tells patient they will perform deep palpation <input type="checkbox"/> Asks patient if they feel pain <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Tells patient they will press down (on McBurney's point) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Asks patient to lift leg against their hand (Psoas sign) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Tells patient that they will press down <input type="checkbox"/> Asks the patient to breathe deeply <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Medical Spanish OSCE Rubric

EVALUATOR AND PATIENT ASSESSMENT OF SPANISH ABILITY	Language is a barrier to encounter	Significant effect on encounter	Moderate effect on encounter	Minor effect on encounter	No negative effect on encounter
1. Rate the student's speaking ability (rate, fluidity, pronunciation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Rate the student's use of medical vocabulary (quantity of words and use of follow-up questions/comments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Rate the student's ability to use grammar correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Rate the student's ability to understand the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. (Patient interpretation) Did the patient understand the student?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. (Patient interpretation) Did the student demonstrate attentiveness and respect through verbal and non-verbal communication?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Check only one box below
Using the scale below, rate the student's ability to interact with a patient:	
0 – Doesn't speak any Spanish	<input type="checkbox"/>
1 – Is limited to greetings and goodbyes.	<input type="checkbox"/>
2 – Can understand very common medical terminology but wouldn't feel comfortable responding or initiating conversation in Spanish.	<input type="checkbox"/>
3 – With difficulty, can speak to patients about very common topics and common anatomy.	<input type="checkbox"/>
4 – With relative ease, can speak to patients about very common topics and common anatomy.	<input type="checkbox"/>
5 – With difficulty, can speak to patients about more intricate medical and nonmedical terminology.	<input type="checkbox"/>
6 – With relative ease, can speak to patients about more intricate medical and nonmedical terminology.	<input type="checkbox"/>
7 – With very limited help or while making clinically insignificant mistakes, can conduct an entire patient interaction (history & physical).	<input type="checkbox"/>
8 – Can conduct an entire patient interaction without the aid of a translator.	<input type="checkbox"/>
9 – I consider this student a fluent Spanish-speaker.	<input type="checkbox"/>

Narrative Feedback (Comment on the overall performance – communication skills, examination skills, technique)

Medical Spanish OSCE Rubric

--